FOR INSTRUCTIONS, SEE BACK OF FORM	FORM	
DISCLOSURE SUMMARY PAGE	DR-2	DISCLOSURE
COMMITTEE NAME (Must be same as on Statement of Organization)	(Rev. 01/2001)	REPORT
Friends of Jim LyKam	For Office Use O	nly 1 2 -
IMPORTANT: Indicate type of committee you are reporting for:	Comm. #	1397
	Indexed_5	
(1)Statewide Legislative Candidate (2)Statewide PAC (3)State Party (4)County/Local Candidate (5)County PAC (6)Ballot Issue/Franchise Committee (7)County/City Central Committee	Audited	
(8)Support State of Candidates	Computer	
CANDIDATE COMMITTEES ONLY:		
Candidate Name Political Party		
Jim Lykam Democrat		
Office Sought District (if Senate of House) State Rennesentative 85		- 5 E
STAR REPRESENTATIVE		
Bolling Sukan (513) 391-1919	7 10	1150/10
SIGNATURE OF TREASURER (or person filing this report) TELEPHONE	DATE	SIGNED ?
	200 A- 2000	<u> </u>
Routine Penalties Due For Late Filed Reports Range from	⊅∠∪ to \$8∪ 0	
SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:		
I AM FILING A October 19, 2010 REPORT FOR ANIA (1) ELECTION	$\overline{}$	TION YEAR.
(report date) Indicate	one []	
CHECK IF AMENDMENT TO REPORT DATED Local 0	Committees, enter	Date of Election
Count	. 9 Local Committe	es, enter County in
	Election is held	es, erker courky iii
STATEMENT OF CASH ON HAND		
CASH ON HAND at the beginning of the reporting period. (This is the total of all monies held by the committee. This amount MUST be the same as the cash on hand at the end		112 11
of the last reporting period, or must be zero if this is first report filed.)	.\$ <u>-5, '/</u>	48.14
ADD TOTAL MONEY TAKEN IN THIS PERIOD	1, 1	ar no
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)	16, 6	75.00
Schedule F: Loans Received total (Attach Schedule F)		
Schedule H: Total Sales of Campaign Property (Attach Schedule H)		
(Schedule H applies to Candidates' Committees Only)		1111 001
SUB-TOTAL	.s dd, 4	23.14
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	18 1	108 21
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)	,	NU U: ONBO
Schedule F: Loan Repayments total (Attach Schedule F)		Ł
CASH ON HAND at the end of this reporting period (if final report, balance must	. 421	4.88
be zero) (Attach DR-3)	·* - / 	4 · W V
**UNPAID BILLS (From Schedule D - Attach Schedule D)	4~	
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)		.00
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$	
CANDIDATE COMMITTEES ONLY:		M
CONSULTANT BREAKDOWN (Schedule G Attached?)	Y	es X no
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	s —	

FORM

1 OF HIGH GORDING TOO SHOP OF F 41115	, , ,	,
CONTRIBUTIONS — MONEY TAKEN IN (Including candidate's personal funds)	A (Rev. 06/97)	MONETARY RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization) Friends of Jim Ly Kan		CK THIS BOX IF NDING FORM
STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE DISCLOSURE BOARD.		
CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statement for any commercial purpose by any person other than statutory political committees.	ents for soliciting	contributions or

DATE RECEIVED (MWDD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
7/15/10	ID#	Joan Helms 6502 Stonehaven Ct. Davensort Ia 52807		\$50.00	
7/15/10	ID# CK#	Margaret Hathaway 2503 Gaines St. Davenport Ia 52804		25.00	
7/16/10	CK# 1968	Well PAC' 636 Grand Ave. Station! Des Moines, Fa 50309	3	250.00	
7/17/10	ID#	Dianne Spahr 2032 N. Birchwood Davenport, Ia 52804		35.00	
7/17/10	ID#	Lynne Chamberlin 709 grand Ave. Daverport, In 52803		50.00	
7/17/10	CK#2678	Towa Committee on Political Education AFZ-SIO 2000 Walker Swite A Des Moines, Ia 50317		200.00	
7/19/10	CK#	Richard Hansen 2808 W. 354 St. Davenport, Ta 52806		35.00	
7/19/10	CK#	Richard Clewell 253 Fernwood Ave. Davenport, Ta 52803		25.0V	
7/20/10	ID# CK#	Brian Nagle 4207 Woodland Ct. Davenport In 52807		25.00	
7/20/10	ID# CK#	Dennis De Decker 3400 Central Ave. Bettendorf Ta 52722		50.00	

"Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page of (for Schedule A)

	····, ··· › › · · · · · · · · · · · · ·	•••	100	1	1
•	IONS — MONEY TAKI		(Rev. 06	MONET (97) RECE	
	<u> </u>			CHECK THIS B	
COMMITTEE	NAME (Must be same a	s on Statement of Organization)	1	AMENDING FO	RM
Friend	es of Jiv	n Lykan		····	
STATE CANDIDA NUMBER AND THI DISCLOSURE BOX	E PAC CHECK NUMBER IN TH	TTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTIC IE DESIGNATED COLUMN, A LIST OF ID NUMBERS IS AVAI	ON COMMITTEE), LIST THE PALABLE FROM THE IOWA ETH	AC IDENTIFICATIO IIÇS AND CAMPAI	ON GN
		de, prohibits the use of information copied from repo n other than statutory political committees.	rts and statements for so	liciting contribut	ions or
DATE	PAC ID NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP	AMOUNT	√ JF

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
7/23/10	ID# CK#	Oscar Hawley Court South 2170 Norman Court South Bettendorf In 52722		\$25.00	
7/23/10	ID# CK#	Diane Delevich 1823 E. Rusholme Davenport, Fa 52803		100.00	
7/24/10	ID# CK#	anne Rasp 4134 M.W. Blud. N210 Davensort Ia 52806	,	30.00	
7/24/10	ID# CK#	Patricia Bear 1515 W. 29th St. Davennort, Fa 52804		25.00	
7/27/10	ID#	Marlin Volz Jr. 2304 Wynne wood Ct. Daven port Ia 52807		50,00	
1/28/10	ID# CK#	gary Mohr 4755 School House Rd. Betterdorf Fa 52722		25.00	
7/29/10	ID# 6064 CK# 3045	Friends of Rural Electrific Priends of Rural Electrific Des moines 198 5032276 48	et or	400,00	
7/29/10	ID#	John Cirnold 2574 E. george Washinfor Devensort, Ja 52803	Blud.	50.00	
7/30/10	ID#	Rey Kidenour 111 8 3rd St. Davendort Fa 52801		50.00	
7/31/10	ID#	Terry D. Glandon 2041 n. Glark Davennot. Fa 52804		50.00	
			SUB-TOTAL	80500	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page ______of_____

I OF HIGH COMMING AND PROPERTY OF THE	100	1
CONTRIBUTIONS - MONEY TAKEN IN (Including candidate's personal funds)	(Rev. 06/97)	MONETARY RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization) Friends of Jim Hykam		CK THIS BOX IF NDING FORM
STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION CO	AMITTEE), LIST THE PAC IDE	NTIFICATION

NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
8/3/10	ID#	Lisa Brothers arbisser 2122 Winding Hill Rd. Davenport, Fa 52807		\$25.00	
8/3/10	ID# CK#	Patricia Matson 1545 W. 49mst. Daverport, Ia 52806		25.00	
8/5/10	ID# 6098 CK# 3724	Jowa Bev PAC Suite31 321 E. Walnut Suite31 Des Moines, Ia 50309	0	1,000.00	
8/9/10	ID# 6063 CK# 2385	Jowa Dental association 5530 West Parkway Suite Johnston, Ia 50/3/	100	40.00	
8/13/10	ID# . CK#	Lawrence Peinert 6208 Kelling St. Davenport, Ia 5 2806		10.00	
8/13/10	ID# 6116 CK# 1836	Political Action-Town Dealers 1311-50th Street West Des Moines, In 50266		100.00	·
8/18/10	ID# 8048 CK# /272	Millwright Local Union 2150 2707 62nd St. Ct. Bettendorf, Ta 52722		250.00	
8/20/10	ID# 8262 CK# 2022	Bridge Structural & Ornamental From Workers Local III 8000 29th Street West Rock Island II 61201		200.00	
8/25/10	ID# 6021 CK#002588	Credit Union PAC 7.0. Box 10409 Des Moines Ja 50306		1,000.00	
8/27/10	ID# 6237 CK# 2 220	ABATEPAK 3118 Eastern Ave. NE Cedar Rapids, Ia 52402		200.00	
<u> </u>	<u> </u>		SUB-TOTAL	1 25.44	

Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

(Includin	g candidate's personal fun	ads)			CHECK THIS BO	YIE
COMMITTEE N	AME (Must be same	as on Statement of Organization)		_	AMENDING FOR	I
Friend	s of Jim	i Lykam				
NUMBER AND THE DISCLOSURE BOA!	PAC CHECK NUMBER IN 1 RD.	BUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION (THE DESIGNATED COLUMN, A LIST OF ID NUMBERS IS AVAILAI	OLE PROMITIN			•
CAUTION: Section of the commercian commercians commercians commercians and commercians commercians and commercians commercians and commercians commerc	ion 68B.32A(6), Iowa C ial purpose by any pera	ode, prohibits the use of information copied from reports on other than statutory political committees.	and stateme	ents for so	oliciting contribution	ns or
DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	TO CAN	ONSHIP DIDATE* licable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
8/30/10	ID# 6067 CK#5/35	Towa Health PAC. 1775 goth St. West Des Moines Ja 5026	6		250.00	
9/2/10	ID#6056 CK#3983	Bankers Unite in Legislative Towa Bankers association 8800 NW 62nd Auc.	}		1,000.00	
\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	ID#	Johnston, Ja 50/31-6200	<u>/</u>		~~	
9/3/10	ID# 6357 CK# /6/0	Petroleum Marketers & Convenien Stores of Jowa 10430 New York Ave. STEF Urbandale, Ja 50322-377	Į		1,000.00	
9/7/10	ID# 6073 CK#/680	Towa Medical PAC 1001 grand Auc. West Des Moines, In 50265			100.00	
9/8/10	ID#	James Stolley 2867 Cedar St Davenport, Ia 52804	4		20.00	
9/8/10	ID#	Charles Isénhart Po. Box 3353 Dubugue, Ia 5204			50.00	
9/11/10	ID# 629/ Ск# 2822	Towa Hospital Association 100 E. Grand Suite 100 Des Maines, Ta 50309			500.00	
9/12/10	ID# 8416 CK# //09	Jour Corn Growers Ussociation 5505 NW 88th St #100 Johnston, Ia 50131		. 76	1,000.00	
9/14/10	ID# 6082 CK# 1575	Middmerican Energy Co. Effective Government Committee 666 Grand Ave. 7.0. Box 657 Des Moines, Fa 50303			250.00	
# Pivale was fe	شدور و فعال الهجود و و و و و و و و و و و و و و و و و و	TOTAL (if last pa	_		s4,170.00	
Disclosure law I	ednites caudidate couluir	rade to discosa the Louristialis of still latenta timenila a colors	- 1 45 - 6		.)/	\)

committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

CONTRIBUTIONS - MONEY TAKEN IN

MONETARY

RECEIPTS

(Rev. 06/97)

CONTRIBUTIONS — MONEY TAKEN IN (Including candidate's personal funds)	A (Rev. 06/97)	MONETARY RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization) Friends of Jim Lykam		ECK THIS BOX IF ENDING FORM
STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTIONUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN, A LIST OF ID NUMBERS IS AVAID DISCLOSURE BOARD.	N COMMITTEE), LIST THE PAC ID LABLE FROM THE IOWA ETHICS /	ENTIFICATION UND CAMPAIGN

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
9/16/10	CK# 5044	Ussociated Gen. Contractors 701 E. Court Ave. Of Ia. Des Moines, Ia 50309-4941		\$1,000.00	
9/20/10	ID# 6059 CK# 3573	Towa Committee of Automotive Reta 1111 Office Park Rd. West Des Moines In 50265		250.00	
9/22/10	ID# 6058 CK# 4794	Town Chiropractic Society 100 East Grand Ave. 572246 Des Moines, In 50309	, ·	500.00	
9/22/10	ID# CK#	A.J. Van Camp III 4329 Edwards Ct. Davenport, Ia 52807		25.00	
9/23/10	CK*00/903	Hyvee Employee's PAC 5820 Westown Parkway West Des Moines, Ja 50266		250.00	,
9/23/10	ID# 6/25 CK# 1/0/	Towa Real fors 1370 NW 1144h #100 Clive, In 50325		2,500.00	
9/25/10	ID# 6042 CK# 1538	grocers PAC 2540 106th St. Ste 102 Des Moines, Ta 50322		100.00	
9/27/10	ID# 6/0/ CK#3650	Truck PAC Iowa P.O. BOX 6/21 East Des Moines STN Des Moines, Io 50309	<i>(</i>	500.00	
9/28/10	CK#3197	Jowans for a Skilled Work 707 East Locust Street Des Moines, Ia 50309	orce.	250.00	
9/29/10	ID# 6160 CK# 2496	Community Bankers of Towa 1603 22nd St. Suite 102 West Des Moines Fa 50266		250.00	
		,	SUB-TOTAL	5125 m	

TOTAL (if last page of this schedule)

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

CONTRIBUTIONS - MONEY TAKEN IN	A (Rev. 06/97)	MONETARY RECEIPTS
(Including candidate's personal funds)		CK THIS BOX IF
COMMITTEE NAME (Must be same as on Statement of Organization)	AME	NDING FORM
Friends of Jim Ly Kan		
STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION OF NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN, A LIST OF ID NUMBERS IS AVAILABLE.	OMMITTEE), LIST THE PAC ID! LE FROM THE IOWA ETHICS A	ENTIFICATION IND CAMPAIGN

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
9/29/10	ID# 6027 CK# 2903	Deeve PAC Iowa 666 Grand Ave. Suite 1707 Des Roines, Ia 50309-2509		\$250.00	
10/1/10	ID# 6063 :	Towa Dental association 5530 West PKWY Ste 100 Johnston, Ia 50/31-22	7/	750,00	
10/6/10	ID# 8084 CK#/2025	BNSF Rail PAC P.O. BOX 961039 Fort Worth, 1X. 16/61-	9139	250.00	
10/7/10	ID# 9098 CK# 21284	T.B.E. W. Education (Com 900 Seventh Street N. V. Washin for Do	nitte	250,00)
10/8/10	ID# 6046 CK# 4679	Justice for ALL PAC 505 Fifth Ave, Suite 63 Des Maines, Fa 50309-231	7 7	100.00	
10/11/10	ID# 843 CK# 8/20	Koch PAC- Koch Industries 600 14th St. NW Ste 80 Washington, DC 20005	d	400.00	
10/12/10	ID# 6072 CK#/15/3	NAIFA TOWA 409 Washingtonst Duit Cedar Falls, In 50613	A A	500.00)
	ID# CK#				
	ID#				
	ID# CK#				
L			SUB-TOTAL	2500 N	1

^{*} Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE	
В	MONETARY
(Rev. 09/97)	EXPENDITURES
(1164. 03/37)	EXPENDITURES
	CK THIS BOX IF

COMMITTEE NAME	(Must be	e same	as on Stateme	ent of Organization)	
Frien	15	of	Jim	LyKam	

	r. oras	<u> </u>		
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
	CHECK NUMBER			
7/ 1	ID#	Postruster 4.8	Mail Campaign	, , _
1/5/10	CK#/6/0	4018 Marquette S. Davenport, In 5280	Mail Campaign disclosure reports	\$ 6.15
a/ /	ID#	Scott County Democration		1
7/16/10	CK#/6 //	P.O. Box 2009' Party Davenport, Ta 5 2809	(entribution)	100.00
7/1	ID#	Truman rund	Contribution	4,000.00
7/20/10	CK#/6/2	5661 Fleur Dr. Des Moines, Ia 50321		4,000.00
11	ID#	4.5. Cellular	monthly cell	T10-
//10	CK#/6/3	Palatine, Il 60055	Monthly Cell Phone bill	51.95
8/2/10	ID#	Q. C. Labor Day	ad in booklet	100,00
* *	CK#/6/4	Q. C. Labor Day Parade alliance 3247 East 35 St. Ct. Davenport, Ia 52807	Ud IN NOORIEC	700,00
8/4/10	ID#	Truman Fundy	Contribution	2,000.00
14/10	CK#/6/5	Des Moines, Ia 50321	CONTRIBULION	
8/ /	ID#	Postmaster	Stamps	132.00
111/10	CK#/6/6	933 W. 2nd St. Dayerport, Ia 5289	·	132,00
8/1	ID#	Office May	Copy paper,	
8/11/10	CK#/6/7	Dave Nort Ia 52806	Copy paper, Paper Clips, rubber bands	27.56
		The state of the s	SUB-TOTAL	\$6,417.66
			TOTAL (if last page of this schedule)	\$ "

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 56.6(3)(i).)

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
	CK THIS BOX IF

COMMITTE	E NAME (Must be	same as on Statement of Organization)			
1		of Jim Lykam			
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURP (DESCRIBE TR		AMOUNT EXPENDED
8/11/10	CK#/6/8	Scott County Denocrotic P.O. Boy 2009 Party Dayenport, Ta 52809	Contrib	bution	\$ 250.00
8/ /27/10	CK#/6/9	Jin Lykan. 2906 W. 35th St. Deverport In 52806	Reimbursed 366 miles (183.00
8/30/10	CK#/620	Walgreens 1660 W. Locust Davenport, Ta 52804	unter ch		us 8.97
9/2/10	ID# CK#/62/	Junar Fund 566/ Fleur Dr. Des Moines, Ia 50321	Contrib		2,500.00
9/2/10	ID# CK#/622 -	U.S. Cellular Dept 0203 Palatine, Il 60055-0	Months Phone	bill	51.95
9/21/10	CK#/623	Truman Fund 5661 Fleur Dr. Des Moines, Ta 5034	Contrib	ution	3,500.00
9/23/10	ID# CK#/624	Postmaster 933 W. 2nd St. Davenport, Ia 52801	Stan	ps	132.00
9/28/10	ID# CK#/625	Jim Lykan 2906 W. 35th St. Davenport Fa 52806	Reinbursel- Cable ties, and cups	water	68.18
		,	TOTAL (if last page	SUB-TOTAL	\$6,694.10 \$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 56.6(3)(i).)

Page of 3

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
. —	CK THIS BOX IF

		same as on Statement of Organization)		
<i> </i>	viends	of Jim Lykan		
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
9/30/10	ID# CK#/626	U.S.Cellular Dept 0203 Palatine, I/60055.0	Wonthly cell 203 Phone bill	\$51.95
10//10	CK#/627	Truman Fund 5661 Fleur Dr. Des Moines, Ja 50321	Contribution	5,000.00
9/2/10	D# direct	Northwest Bank & This 100 E. Kimberly Rd. Po Daverport, In 52808		44.58
	ID# CK#	, ,		n 6/24/10 199.50.
	ID# CK#		It was entered on Schedule B as \$999.53.	-34
	ID# CK#			
	ID# CK#			
	ID# CK#			
			SUB-TOTAL TOTAL (if last page of this schedule)	\$5,096.50 \$18.208.26

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 56.6(3)(i).)

Page	3	of <u>3</u>	
_		-	

FOR INSTRUCTIONS, SEE BACK OF FORM	SCHEDULE	
COMMITTEE NAME (Must be same as on Statement of Organization)	(Rev. 06/97)	IN KIND CONTRIBUTIONS
Friends of Jim Lykam		
•		THIS BOX IF

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	√ IF FOR FUND-RAISER CONTRIBUTION
9/14/10	Jim Lykan 2906 W. 35th St. Davenport, Ia 52806	Self	Yard Stakes	25.00	
·	·				
					-
	·				
			SUB-TOTAL	\$25.00	•
•			TOTAL (if last	\$	

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page / of / (for Schedule E)

page of this 25,00

schedule)